

Medicalization, Decriminalization, Legalization and the Path Forward for Psychedelics

Tyler. Kjorvestad, M.D.

Since the passage of The Controlled Substances Act in 1970, psychedelic compounds have been classified as Schedule I Substances, meaning that:

1. The drug or other substance has a high potential for abuse.
2. The drug or other substance has no currently accepted medical use in treatment in the United States
3. There is a lack of accepted safety for use of the drug or other substance under medical supervision ^[1].

With the founding of the Multidisciplinary Association for Psychedelic Studies (MAPS) in 1986 came a slow but steady approach toward utilizing psychedelics within the current medical model^[2]. This medicalization approach for all intents and purposes has been largely successful highlighted by the Federal Drug Administration (FDA) recently granting breakthrough therapy designations to both Psilocybin^[3] and 3,4-Methylenedioxy-methamphetamine (MDMA) ^[4]. While these results are very encouraging and point toward the likely rescheduling of psychedelic substances in a way that is more consistent with their therapeutic potential, some localities across The United States have opted for an alternative approach.

States and localities have adopted different policies concerning drug criminalization compared to those issued by the federal government. As far back as the 1970s, multiple states and cities successfully decriminalized cannabis, but this was short-lived due in large part to the “war on drugs” in the 1980s. The increased efforts to combat drug use during the 1980s resulted in the re-

criminalization of cannabis in many of these locations. The strong public sentiment even led Alaskans to vote to make cannabis illegal again in 1990, more than 15 years after the Alaskan State Supreme Court had declared it legal^[5]. Starting in the early 2000s, the tides again changed, and decriminalization efforts cropped up across the country with the overwhelming majority of those being successful. As of this writing, 27 states have decriminalized cannabis, and of those 27, eleven have successfully legalized cannabis. Of the remaining 23 states, all but two allow for medical cannabis use in some capacity. While cannabis still remains illegal federally, the government has done little to counteract these laws ^[6].

Building off of the work done by the cannabis movement, some cities have sought to decriminalize psychedelic mushrooms. Denver became the first city to decriminalize psychedelic mushrooms in May 2019, with Oakland and Santa Cruz following soon after ^[7]. Efforts are currently ongoing in other cities across the country to adopt similar policies. Unlike with cannabis, there are currently no states that have legalized psychedelic mushrooms or other psychedelic substances, except for rare exemptions given to Ayahuasca for use in religious ceremonies. Given the marked success of the cannabis movement in obtaining legalization, it seems likely that this same strategy will be pursued for psychedelic mushrooms.

The Journal of Psychedelic Psychiatry completely supports and is committed to expanding the medicalization efforts currently being undertaken to bring psychedelic substances into the clinical realm. However, when it comes to discussing

decriminalization and legalization a cautious approach should be taken. The United States spends 47 billion dollars annually fighting the “war on drugs”^[8]. It has not achieved anything close to a success insofar as the reported rates of use of illicit substances are concerned^[9]. While arguments can be made for the full legalization and decriminalization of all substances, proponents of psychedelic decriminalization or legalization should be leery of joining these all-encompassing movements. Psychedelics are not addictive like heroin or methamphetamine, but they are still abusable and certain at-risk individuals should not take psychedelics. Giving opponents of drug decriminalization and legalization the capacity to conflate psychedelic use with other more addictive and dangerous drugs is counterproductive. By isolating the discussion to psychedelics, as has been done successfully in the aforementioned cities, nuanced conversations can be had about the positive benefits and compromises that can be made on how best to handle any adverse events that might arise. In general, *The Journal of Psychedelic Psychiatry* supports decriminalization efforts for psychedelic substances, particularly those that are naturally occurring. Prior to supporting legalization more research into psychedelics is necessary so as to better inform the public about the risks and precautions that should be taken prior to engaging in use. It is our belief that by taking the cautious and prudent medicalization approach, backlashes like those seen in the 1960s and 1970s can be avoided, and in time psychedelics can be more openly accepted within society at large. It is less ambitious than some would like, but it is imperative that this time science and medicine get this right. There is too much potential to have it wasted simply out of haste.

AUTHOR INFORMATION

Send correspondence to Dr. Tyler Kjorvestad
(tkjorvestad@kumc.edu)

Kjorvestad, T (2020, September). Medicalization, Decriminalization, Legalization and the Path Forward for Psychedelics. *The Journal of Psychedelic Psychiatry*, 2(3).

REFERENCES

1. 21 U.S. Code § 812 - Schedules of controlled substances. (n.d.). Retrieved from <https://www.law.cornell.edu/uscode/text/21/812>
2. Multidisciplinary Association for Psychedelic Studies. (n.d.). Retrieved from <https://maps.org/>
3. FDA Grants Psilocybin Second Breakthrough Therapy Designation. (2019, November 25). Retrieved from <https://www.medscape.com/viewarticle/921789>
4. PRESS RELEASE: FDA Grants Breakthrough Therapy Designation for MDMA-Assisted Psychotherapy for PTSD, Agrees on Special Protocol Assessment for Phase 3 Trials. (n.d.). Retrieved from <https://maps.org/news/media/6786-press-release-fda-grants-breakthrough-therapy-designation-for-mdma-assisted-psychotherapy-for-ptsd-agrees-on-special-protocol-assessment-for-phase-3-trials>
5. Alaska Voters Approve Measure to Recriminalize Marijuana. (1990, November 07). Retrieved from <https://apnews.com/article/4db1bf97a3d7c3a94c1d1e304f149c06>
6. State Laws. (2020, June 23). Retrieved from <https://norml.org/laws/>
7. Kaur, H. (2020, February 04). Santa Cruz decriminalizes magic mushrooms and other natural psychedelics, making it the third US city to take such a step. Retrieved from <https://www.cnn.com/2020/01/30/us/santa-cruz-mushrooms-psychedelics-trnd/index.html>
8. Drug War Statistics. (n.d.). Retrieved from <https://www.drugpolicy.org/issues/drug-war-statistics>
9. Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. (n.d.). Retrieved from <https://store.samhsa.gov/product/key-substance-use-and-mental-health-indicators-in-the-united-states-results-from-the-2018-national-survey-on-drug-use-and-health/PEP19-5068>

